

Bank Draft Authorization

I hereby authorize Moore County Public Utilities to automatically debit my account indicated below, at the bank indicated below, for payment of water and/or sewer service for Moore County Public Utilities.

Utilities Account No. _____

Customer Name: _____ Telephone: _____

Customer's Bank Name & Location: _____

Bank Draft Transit Number: _____
(Lower left - First Group of Numbers)

Bank Draft Checking Account Number: _____
(Lower left - Second Group of Numbers)

I hereby agree that thirty (30) days written or oral notification will be given to Moore County Public Utilities prior to discontinuance of my bank draft.

Signature: _____ Date: _____

Customer Information:

Please complete, sign and return this form to: **Moore County Public Utilities, P. O. Box 1927, Carthage, NC 28327.** An original signature is required to process this form.

A voided check or deposit slip from your bank account must be returned with this form.